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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)								
	Richard B Nugent (b) Address (number and street)	Chack if address shapped			2 Candidato's EEC Idea	tification Num	her		
	PO Box 15668	☐ Check if address changed		2. Candidate's FEC Identification Number H0FL05139					
	(c) City, State, and ZIP Code					3. Is This No		Amended	
	Brooksville		Fl	_ 3460	)4-0122	Statement (N	) OR	<b>X</b> (A)	
4.	Party Affiliation	5. Office Sough	nt			rict of Candidate			
_	REPUBLICAN PARTY	House			FL	05			
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGN	COMMITTEE			
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s). (year of election)								
	NOTE: This designation should be filed with the appropriate office listed in the instructions.								
	(a) Name of Committee (in full)								
	Friends of Rich Nug	ent							
_	(b) Address (number and street)								
	PO Box 15668								
	(c) City, State, and ZIP Code								
	Brooksville				FL	34604-0122			
	DE					COMMITTEES			
(Including Joint Fundraising Representatives)									
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.									
	NOTE: This designation should be f	iled with the prir	ncipal campa	aign commit	ee.				
	(a) Name of Committee (in full)								
Florida Young Guns Victory Fund (Adams, Nugent, Ross, Southerland, Webster, West)									
	(b) Address (number and street) 25 E Main Street								
	20 E Main Otrect								
	(c) City, State, and ZIP Code								
	Richmond				VA	23219-2109			
	Leastifu that I have ave	uning and thin Ctate		- th - h t t	man demonda de a la	and ballofit in two answert	and commists		
	·	minea inis State	emeni and i	o ine besi oi	my knowieuge a	nd belief it is true, correct	апа сотпрівів.		
	gnature of Candidate					Date		•	
K	ichard B Nugent			[Elec	tronically Filed]	10/28/2011			
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.									

FEC FORM 2 (REV. 02/2009)

## FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)		Page 2 / 2
	N OF OTHER AUTHORIZED COMMITTEES including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE: This designation should be filed with the p	rincipal campaign committee.	
(a) Name of Committee (in full)		
Central FI Congressional Fund	d	
(b) Address (number and street) PO Box 865		
(c) City, State and ZIP Code		
Brooksville	FL 34605-0865	
	N OF OTHER AUTHORIZED COMMITTEES ncluding Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE:This designation should be filed with the p	orincipal campaign committee.	
(a) Name of Committee (in full)		
Security For America Fund V		
(b) Address (number and street) 4703 Woodway Lane NW		
(c) City, State and ZIP Code		_
Washington	DC 20016-3240	
	N OF OTHER AUTHORIZED COMMITTEES including Joint Fundraising Representatives)	[ ADDITIONAL ]
I hereby authorize the following named committee, which is candidacy.	s NOT my principal campaign committee, to receive and expend funds on	behalf of my
NOTE: This designation should be filed with the p	orincipal campaign committee.	
(a) Name of Committee (in full)		
(b) Address (number and street)		
(c) City, State and ZIP Code		